1999 NATIONAL HIV PREVENTION CONFERENCE

Abstract 755

TITLE: National Surveillance for Newly Acquired HIV Infection in Australia, 1991-1998

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OBJECTIVE: To describe the current pattern of HIV transmission in Australia.

METHODS: Newly diagnosed HIV infection is a notifiable condition in Australia. Information sought at notification of cases of HIV infection includes sex, date of birth, date of first HIV diagnosis in Australia, HIV exposure category, and CD4+cell count. From 1991, evidence has been sought of newly acquired HIV infection, based on a report of a previous negative/indeterminate HIV antibody test and/or the diagnosis of an HIV seroconversion illness within 12 months of HIV diagnosis.

RESULTS: By 30 June 1999, 8,119 cases of HIV infection (91.4% male), newly diagnosed in adults/adolescents in Australia in 1991-1998, were notified to the national surveillance centre; 16.9% were reported as cases of newly acquired infection (94.3% male). While the annual number of new HIV diagnoses declined from 1,409 in 1991 to 718 in 1998, the proportion of diagnoses with evidence of new infection increased from 6.7% in 1991 to 23.9% and then plateaued at 19.5% in 1996-1998. Median age at diagnosis of newly acquired HIV infection and other HIV diagnoses was 30 years and 32 years, respectively. Among cases of newly acquired HIV infection, 54.8% had a negative test only within 12 months of diagnosis, 19.9% were diagnosed with an HIV seroconversion illness only and 25.3% of cases had both a previous negative test and a diagnosis of an HIV seroconversion illness. Exposure to HIV was attributed to male homosexual contact, injecting drug use and heterosexual contact in 88.9%, 3.0% and 8.1% of cases of newly acquired HIV infection, respectively, whereas 78.6%, 4.2% and 17.2% of other HIV diagnoses were attributed to male homosexual contact, injection drug use and heterosexual contact, respectively.

CONCLUSION: While national surveillance provides a lower limit to the number of cases of HIV transmission occurring in Australia, it indicates continuing HIV infection, primarily among younger men who report a history of homosexual contact.

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